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46188	7590 05/1	8/2010	hai	have its own certificate of mailing or transmission.			
Nixon Peabod P.O. Box 60610 Palo Alto, CA 9	Ď	·	I h Sta ade tra:	Cert ereby certify that this tes Postal Service wi bressed to the Mail asmitted to the USPT	ificate of Mailing or Trans s Fee(s) Transmittal is bein ith sufficient postage for fir Stop ISSUE FEE address O (571) 273-2885, on the c	smission g deposited with the United st class mail in an envelope above, or being facsimile late indicated below.	
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	3	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/517,968 12/13/2004 TITLE OF INVENTION: ELECTROMAGNETIC DEVICE FOR		Roger Boen	434299-611 1948 INTERFACIAL AGITATION OF DIPHASE SYSTEMS,				
			R PYROCHEMICAL PR		TION OF DITTAGE 5	I S I LAVIS,	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	08/18/2010	
EXAX	MINER	ART UNIT	CLASS-SUBCLASS				
KERNS, KEVIN P		1793	266-234000				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.							
3. ASSIGNEE NAME A	ND RESIDENCE DAT	A TO BE PRINTED ON	THE PATENT (print or ty	pe)		20000000000000000000000000000000000000	
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
COMMISSARIAT A L'ENERGIE ATOMIQUE PARIS, FRANCE							
Please check the appropr	riate assignee category or	categories (will not be pr	rinted on the patent):	Individual ECor	poration or other private gro	oup entity Government	
4a. The following fee(s)	are submitted:	48	Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)				
Issue Fee	No small antity discount	narmittad)	A check is enclosed. Payment by credit card. Form PTO-2038 is attached.				
Publication Fee (No small entity discount permitted) Advance Order - # of Copies			I'he Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-3557 (enclose an extra copy of this form).				
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interest as shown by the	records of the Villted St	tes Patent and Prademark	Office.			ne assignee or other party in	
Authorized Signature	10104	Z./X.//	Management of the second	Date / 6	H=9-101	<u>'0</u>	
Typed or printed name	Robert E. Kreb	s (/~	<u></u>	Registration No	. 45,885		
an application. Confident submitting the complete this form and/or suggest	tiality is governed by 35 d application form to the ions for reducing this bu /irginia 22313-1450. DC	U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the	1.14. This collection is es depending upon the indi- e Chief Information Office	timated to take 12 m vidual case. Any con er. U.S. Patent and T	e public which is to file (and inutes to complete, including ments on the amount of tit rademark Office, U.S. Dept SEND TO: Commissioner	ig gathering, preparing, and me you require to complete artment of Commerce, P.O.	

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